

PART B—ISSUE FEE TRANSMITTAL

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1. CORRESPONDENCE ADDRESS		B2M1/1004	
VYTAŠ R. MATAS			
2412 CEDARWOOD ROAD			
PEPPER PIKE OH 44124			
		2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)	
		INVENTOR'S NAME	
		Street Address	
		City, State and ZIP Code	
		CO-INVENTOR'S NAME	
		Street Address	
		City, State and ZIP Code	
		<input type="checkbox"/> Check if additional changes are enclosed	

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/536,209	09/29/95	030	WIGGINS, J	2212 10/04/95
First Named Applicant	MICHAEL, MIKE			

TITLE OF INVENTION		EX-SITU GRAIN MOISTURE ANALYZER FOR A COMBINE	
040 WT 01/15/97 08536209	1 142	1,290.00 CK	
040 WT 01/15/97 08536209	1 561	9.00 CK	

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
3 EX-2	073-029.010	E21	UTILITY	NO	\$1290.00	01/06/97

3. Correspondence address change (Complete only if there is a change)

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1 _____

2 _____

3 _____

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE: FARMEX INC.	6a. The following fees are enclosed: <input type="checkbox"/> Issue Fee <input checked="" type="checkbox"/> Advance Order - # of Copies <u>3</u>
(2) ADDRESS: (CITY & STATE OR COUNTRY) AURORA, OHIO	6b. The following fees should be charged to: DEPOSIT ACCOUNT NUMBER (ENCLOSE A COPY OF THIS FORM) <input type="checkbox"/> Issue Fee <input type="checkbox"/> Advance Order - # of Copies _____ <input type="checkbox"/> Any Deficiencies in Enclosed Fees
A. <input type="checkbox"/> This application is NOT assigned. <input checked="" type="checkbox"/> Assignment previously submitted to the Patent and Trademark Office. <input type="checkbox"/> Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS. PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.	The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above. (Authorized Signature) <u>[Signature]</u> (Date) <u>12-31-96</u> NOTE: The Issue Fee will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

Certificate of Mailing

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I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

Box ISSUE FEE
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Washington, D.C. 20231

on: December 31, 1996 (Date)
Vytaš R. Matas (Name of person making deposit)
[Signature] (Signature)
December 31, 1996 (Date)

1. TRANSMIT THIS FORM WITH FEE